

tubules. The chronic cases showed the same lesions as the acute cases plus searing and fibrotic changes. In the nephrotic cases tubular changes predominated.

The Breast-fed Pellagrin: Relation to the Avitaminoses.—LUSTBERG and BIRCHETT (*Arch. Pediat.*, 1922, 39, 254) eliminate the specific infectious theory as the causation of breast-fed pellagra. In treating in their institution more than 50 cases a year of men, women and children without segregation there never has developed a case among the other patients or among the help. The manifestations of the disease in both mother and child present themselves in the spring and summer. A dietary error shown to be pre-pellagrous was prevalent in the winter diet of the mother. A pre-pellagrous diet, such as dried beans, dried peas, corn-meal, lard and canned evaporated milk, contains an excess of carbohydrate and lacks protein. This diet is unbalanced and it has excess foodstuffs shown to be poor in vitamins, and further it has not the proteins, a foodstuff which has been shown to be rich in vitamins. The character of this diet undoubtedly influences a baneful effect on mothers' milk, and therefore the suckling infant shares in the deficiencies. Curative results were obtained by placing the infant on artificial food such as cows' milk, fruit juices, vegetables, zweiback and purees. This ration is well balanced and contains vitamins in full force.

Eczema in Breast-fed Infants as a Result of Sensitization to Foods in the Mother's Dietary.—SHANNON (*Am. Jour. Dis. Children*, 1922, 23, 392) found that eczema in breast-fed babies was a result of sensitization to food proteins contained in the mothers' dietary, and transmitted to the infant through the breast milk in a great majority of cases. Removal of these proteins from the diet of the mother usually results in cure of the condition in the patient. In cases in which all the foods cannot be eliminated from the diet of the mother, limitation of the same will often result in improvement of the eczema, presumably because there is a threshold in the mother up to which the food may be taken without its harmful constituents appearing in the breast milk. Sensitization of the infant may be determined by the cutaneous reaction to the purified proteins. The erythematous reaction at the site of the test is to be considered as indicating sensitization, and being much more common than the wheal, is correspondingly more important. Sensitization is usually multiple, and may be to a majority of the foods in the dietary of the mother. Sensitization to become more widespread in a great many cases as time goes on, due to acquisition of sensitivity to new foods. Repeated exacerbations and failure to cure may be due to a lack of coöperation on the part of the mother, to sensitization so widespread as to make sufficient limitation of the diet impossible, to failure on the part of the physician to test for all foods, to the acquisition on the part of the infant of new sensitization, and to error in the procedure of determining sensitization whether avoidable or otherwise. As general prophylactic measures, it is recommended that all mothers be cautioned to eat a large variety of foods, and a small quantity of any individual article of diet, that eggs be restricted rather than forced in the diet of the mother, and that all cases of eczema be

studied early and that offending foods be eliminated before sensitization becomes so widespread as to make limitation of the diet impossible. The proper study of all cases of eczema in breast-fed babies that do not yield promptly to the older methods of treatment requires the determination of sensitization in the infant to all of the foods contained in the diet of the mother and in the event of exacerbation, the frequent repetition of these tests.

Sitting Height and Stem Length in Private-school Boys.—GRAY (*Am. Jour. Dis. Children*, 1922, 23, 406) feels that height measurements are being rivalled and possibly superseded by measurements of the trunk independent of the legs. The best trunk length seems to be the sitting height at present, as well as the stem length. These measurements are closely similar. In his report these two measurements are taken from 114 picked upper-class school-boys. The sitting height was not constantly parallel to the stem length, for while it averaged one-half inch greater it varied anywhere from being identical in some boys to two inches greater in others. The stem length was found to be easier to measure accurately as there were more constant agreements in repeated measurements. The absolute values both of stem length and sitting height, averaged according to age, showed greater values than any that he was able to find in the literature. This is natural considering the advantages enjoyed by this group of boys, as it is certain that strains of men can be bred as well as horses. The proportional sitting heights, or sitting heights related to stature, were markedly less than those in the literature. This means that well-developed children have longer legs for their heights than children retarded in growth, which may be stated that the principal defect of growth in badly nourished children lies in the lower extremities. The author believes that stem length should replace the sitting height measurement in the fields of anthropology and of school hygiene.

Prophylactic and Therapeutic Value of Pertussis Vaccine.—DAVIES (*Am. Jour. Dis. Children*, 1922, 23, 423) states that pertussis gained access to his institution through a child who had been exposed before admission. Of 176 children exposed, 114 had not had the disease 20 had had the disease, and the history was inadequate in 42 cases. Thirty-three children developed the disease. Records in 27 of these cases were negative for previous attack and doubtful in the remaining 6. These cases were admitted to the hospital ward with a positive diagnosis of pertussis based upon the clinical findings in the majority of the cases. The remaining 146 children were given prophylactic doses of pertussis vaccine regardless of previous history. After the first 33 cases were removed from the main building only 4 additional cases developed. It is quite sure that the others were exposed to the disease at the time of the greatest infectivity. Most of the children were very young, and the majority had not had the disease. Although it appears that the individual child responds differently to the pertussis vaccine, the duration of the disease is shortened by its administration. The paroxysms were lessened in severity and duration, and whooping and vomiting were obliterated.